[11/01D]

Mail Application to: List Coordinator Administrative Office Probate and Family Court Dept. 2 Center Plaza, Suite 210 Boston MA 02108

For court use only

Reviewed

Entered

Application to the Probate and Family Court Department for appointment as

Master

pursuant to:

	Mass.R.0	Civ.P. 53,	Mass.F	R.Dom.Rel.P.	53, G.L. c. 221, §	57	
Name:	(Street and Nun	nber)					
Firm Name:	(Street and Nun	nher)					CATEGOR
Address:	(Street and Num	ilber)	Jet)				
			(Street and Number)				S
		(City or Town)			(State) (Zi	ip Code)	
Telephone No()	(5.5)	,		B.B.O. #	,	
- (/	Area Code)						
E-Mail Address							
□ I certify that I was that I remain in good been convicted of ar	standing to pra-	ctice befor	re the Sure the cou	upreme Judicia urts of the Com	l Court on monwealth of Mass	achusetts, ar	nd that I have not
I further certify							
Massachusetts	s, which has incl	uded parti	cipating	in at least 7 pro	robate field in the fobate trials [†] in which y on the stand, or		
Courts of Mass	sachusetts, which	ch has incl	luded pa	irticipating in at	mestic-relations fie t least 7 domestic re ant and gave testin	elations trials	* in which, for at
□ that I have the cases pursuan	required experi t to Mass.R.Civ	ence and e .P. 53, Ma	expertise ss.R.Do	e to serve as a m.Rel.P. 53, G	master in probate 6.L. c. 221, § 57	or domestic r	elations or other
[†] Three of the probat on the stand, are:	e cases in whic	h I represe	ented a p	party and, on at	least two days of ea	ach trial, exar	nined witnesses
DIVISION	DOCKET N	JMBER		NAME OF C	CASE	JUDGE WHO	O HEARD TRIAL
		ĺ					
*Three of the domes	tic relations cas	ses in whic	h I repre	sented a party	and, on at least two	days of eacl	h trial, examined
witnesses on the sta	nd, are:	1	·			1	1
DIVISION DOCKET N		JMBER		NAME OF	CASE	JUDGE WE	HO HEARD TRIAL
OR							
☐ I certify that I was i of the Commonweal	nominated as a th by Governor	Justice of	what is ı	now the Probat	e and Family Court , and that I	Department o was sworn in	of the Trial Court to that office on
I further certify	·						
•	om the bench or	n			_, and that I still hav	e most of my	marbles, or
					, then resumed monwealth of Mass		
been convicted	-						
(For former judges v coverage of \$100,00						ssional liabilit	y insurance with
			·	•	, ,		
			(Na	me of Company)			
The policy number is	(Policy Number)						
The limits of liability							
I request and I WILL Court Department:		tments fror	,	mits of Liability) lowing (not mo	re than four) divisio	ons of the Pro	bate and Family
	Berkshire	□ Bristo	I	□ Dukes	□ Essex	□ Franklin	□ Hampden
	Middlesex	□ Nantu		□ Norfolk			□ Worcester
I understand that, un requests a certificate I understand that, un 2001, a certificate of	of my profession less I am a retire	onal liabilit ed judge, t	y insurar o remain	nce, I will provio on the list, I m	le the certificate with ust mail to the List C	nin seven day coordinator ea	s of the request.
I have attached to the standing with the Su	nis Application apreme Judicial	a copy of Court. Th	my resu	ume and, unlestate was issued	ss I am a retired jud d not more than 30	lge, a certific	cate of my good
	-		o ub				
Date:			_		(Signature	of Applicant)	